

| No. C 100586 | | Due no later than Dec 31, 2010 Annual Report Form | | 2. Registered Agent and Address (NO PO BOX) | | | |
|--|-------------------|---|---------------|---|---------|--|--|
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE | | 1. Mailing Address: Correct in this box if needed. FAMILY CHILD CARE ASSOCIATION OF KOOTENAI COUNTY, INCORPORATED CHERYL STAFFORD 4201 N STAPLES AVE COEUR D ALENE ID 83815 | | CHERYL STAFFORD 4201 N STAPLES AVE COEUR D ALENE ID 83815 | | | |
| | | | | | | 3. <u>New</u> Registered Agent Signature:* | |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors, Treasurer (optional). | | | | | | | |
| Office Held | Name | Street or PO Address | City | State | Country | Postal Code | |
| DIRECTOR | SHERRY JACOBS | 3417 E. PINEHILL | COEUR D ALENE | ID | USA | 83814 | |
| DIRECTOR | KATIE STAFFORD | 2518 W VERSAILLES | COEUR D ALENE | ID | USA | 83815 | |
| TREASURER | MIQUELLE TRAVERSE | 4411 N. ARTHUR | COEUR D ALENE | ID | USA | 83815 | |
| DIRECTOR | RONI MOORE | 1506 W 7TH ST. | COEUR D ALENE | ID | USA | 83814 | |
| DIRECTOR | MIQUELLE TRAVERSE | 4411 N. ARTHUR | COEUR D ALENE | ID | USA | 83815 | |
| SECRETARY | LINDA FAULK | 1722 TULLIS | COEUR D ALENE | ID | USA | 83815 | |
| PRESIDENT | CHERYL L STAFFORD | 4201 N. STAPLES AVE. | COEUR D ALENE | ID | USA | 83815 | |
| 5. Organized Under the Laws of: ID C 100586 | | 6. Annual Report must be signed.* Signature: Cheryl Stafford Name (type or print): Cheryl Stafford | | | | | |
| | | Date: 10/25/2010 Title: President | | | | | |
| Processed 10/25/2010 * Electronically provided signatures are accepted as original signatures. | | | | | | | |